Clear Forn

MANDATORY ANNUAL REPORT INCLUDING SELF-CERTIFICATION FOR VEHICLE DISMANTLING FACILITIES (If you need assistance filling out this form please email swmfannualreport@dec.nv.gov or call 518-492-8678.)

Submit the Annual Report no later than March 1, 2018.

This annual report is for the year of operation from <u>January 01, 2017</u> to <u>December 31, 2017</u>

SECTION 1 - FACILITY INFORMATION

SECTION OF THE PROPERTY OF THE		CILITY INFORMATIO	N			
FACILITY NAME:	FACILIT	YINFORMATION			The state of the s	
Middendorf Auto Salva	00					
FACILITY LOCATION ADDRESS:						
	FACILITY			STATE:	ZIP CODE:	
770 Spaulding Hill Rd	Oweg	jo .		NY	13827	
FACILITY TOWN:	FACILITY	COUNTY:	FACII	LITY PHON	J ∤E NUMBER:	
Tioga	∣Tioga	l	607	⁷ -222-	-5472	
FACILITY NYS PLANNING UNIT: (A list of NY N/A	S <u>Planning Uni</u>	ts can be found at the end of th	ils report	n NY	SDEC GION #: 7	
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER: 7043163	Disn	ISTRATION TYPE (Vehic nantler, Mobile Crusher, e le Dismantler	le etc.):	NYS DE CODE: 84522	C ACTIVITY	
FACILITY CONTACT:	🖪 public	CONTACT PHONE		ONTACT	FAX NUMBER:	
Anthony Middendporf	private	NUMBER: 607-222-5472			37-3166	
CONTACT EMAIL ADDRESS: middendorfg	jolf@yahod	o.com				
OWNER NAME:		INFORMATION		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Anthony Middendorf	607-222	HONE NUMBER:		R FAX NU		
OWNER ADDRESS:	OWNER C	607-687-3166				
770 Spaulding Hill Rd	Owego	111.		STATE: NY	ZIP CODE: 13827	
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRESS:					
607-222-5472	midder	ndorfgolf@yaho	00.C	om		
OPERATOR NAME: Same as owner	<u>OPERATOR</u>	NFORMATION				
Same as Owner				□ public □ private		
Professor address	PREF	ERENCES			pini simi. Na sanjiranjara d	
Preferred address to receive correspondence: Other (provide):	Facility loca	ation address	□ ом	ner address		
Preferred email address: Facility Contact Other (provide):		per Contect				
Preferred individual to receive correspondence. Other (provide):	: Facility	Contact Owner C	ontact			
	-·			·		
Did you operate in 2017? 🖭 Yes; Complete	this form.					
□ No; Complete	and submit S	ections 1 and 11,				
						

	SECTION 2 - END-OF-LIFE VEHICLES (ELVs)	_	·
• Provide th	ne number of ELVs received from January 1 to December 31:	6	
 Provide the from January 	ne number of ELVs crushed and/or removed from the facility ary 1 to December 31:	18	
• Provide th	e number of ELVs stored at the facility as of December 31:	83	
 Provide the at any one 	e highest number of ELVs stored at the facility time from January 1 to December 31;	83	<u>. </u>
• Provide th	e approximate area used for the storage of vehicles (acres):	4	acres
• Provide th	e names of scrap metal processors to which you sold or sent d	decommissio	ned Fl Vs.
Ren	Maitaman		ico LL v.a.
1) 5011	Weitsman		
, <u></u>		'	
, <u></u>	vveitsman	'	
2)			
2)			
2)			
2)			
2)			
2)3)	Ur facility has received 25 or fewer ELVs during the year A		no more than
2)			no more than 11.
2)	ur facility has received 25 or fewer ELVs during the year A E LVs at any one time <u>check this box and complete only</u> section	AND stored ns 3, 4, and	<u>11</u> .

Please, write "Not Applicable" on sections that do not pertain to your facility.

IF NEITHER OF THESE DESCRIPTIONS APPLIES TO YOUR FACILITY,

If not, leave this box blank

COMPLETE THE ENTIRE FORM BELOW:

SECTION 3 - WASTE FLUIDS RECOVERED

Complete this table by reporting volumes of End-of-Life Vehicle (ELV) waste fluids managed at the facility during the reporting period. Qualitative responses (i.e. \sqrt{s} or X's) are not acceptable. Report only fluids generated from dismantling operations (not general car repair, etc.)

	<u> </u>	Fluid	Volume		Destination Name & Address
Waste Fluid Recovered	Used on-site (oil heater, etc.)	Stored on-site at year-end	Sold/ Recycled off-site	Disposed off-site*	(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)
Refrigerant (pounds)	0	0	0	0	
Used Oil** (gallons)	150	150	0	0	
Diesel Fuel (galiona)	0	0	0	0	
Gasoline (gallons)	65	0	0	0	
Engine Coolant/ Antifreeze (gallons)	6	0	0	0	
Window WashIng Fluid (gallons)	2	0	0	0	, , , , , , , , , , , , , , , , , , , ,
Other (specify)			_		7.0

^{*} Any fluids disposed must undergo a hazardous waste determination and proper handling, storage and disposal if hazardous.

^{**} Includes Engine Oil, Transmission Fluid, Axle Fluids, Hydraulic Fluid, Power Steering Fluid, Brake Fluid, etc.

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SECTION 4 - SCRAP METAL

Complete this table by reporting the amount of metal received, stored and sent off site, by the facility, during the reporting period.

Material Types	Received	Stored On Site	Destination	l			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(tons) 	(tons)	Sent Off Site (tons)	NYS <u>Planning Unit</u> (or state if other than New York)	M	Scrap etal essor	
Ferrous Scrap Metal	0				Yes	No	
Aluminum Scrap Metal	0			<u> </u>	Yes	No E	
Lead Weights	0				Yes	No (a	
Non – Ferrous Scrap Metal	. 0			·	Yeş	No Œ	
Other (specify):	···			· -	Yes	No F	
					Yes	No E	

SECTION 5 - MERCURY SWITCHES COLLECTED

	·
Provide the number of mercury-containing devices <u>recovered</u> . (H&TS) and antilock brake assemblies (ABS).	Including but not limited to hood & trunk lighting switches
H&TS <u>0</u> (Number)	ABS 0 (Number)
Indicate permitted facility or permitted transporter accepting m	ercury containing devices:
	<u> </u>

Note: Use additional 8.5" x 11" sheets as needed.

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SECTION 6 - LEAD-ACID BATTERIES COLLECTED

Provide	the num	ber of lead-acid batteries <u>recovered</u> and their disposition	ı .	
		Acid Batteries collected from ELVs	<u>40</u>	_
Indicate Ben	permitte Weit	d facility or permitted transporter accepting lead-acid bat	terięs;	
		·	<u>. </u>	
_	···			
Any ma hazardo	terials dis ous.	posed must undergo a hazardous waste determination a	ind proper handling,	storage and disposal if
		SECTION 7 - WASTE TIRES CO	OLLECTED	
Number	of waste	tires stored on-site:	175	as of December 31
Number	of used ti	res available for sale on-site:	Ō	as of December 31
	of used ti		0	
Number	of waste	tires shipped off-site for recycling, disposal, other:	0	during operating year
		acility(ies) accepting waste tires:	**	during operating year
	-		·	
			<u> </u>	
_				
_		SECTION 8 - PROBLEM	AS	
Were ar facility p	ny proble: procedure:	ns encountered during the reporting period (e.g., specifics)?	c occurrences which	have led to changes in
□ Yes 	■ No	If yes, attach additional sheets identifying each proble problem.	m and the methods :	for resolution of the
	·	SECTION 9 CHANGE	 S	
Were th	ere any cl	hanges from approved reports, plans, specifications, and	permit conditions?	
□ Yes	■ No	If yes, attach additional sheets identifying changes with		ach change.
			-v	

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SECTION 10 - COMPLIANCE CERTIFICATION

As of December 31, 2017:

Waste Management Compliance Checklist	NA.	Yes	No	Date of Return Compliance
1. If your facility stores LESS THAN 1,000 tires, check NA If your facility				
TO THE PART OF THE	x			
 Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways? 		x	_	, <u>,</u>
3. Have you recorded the date of receipt for all end-of-life vehicles received?		x	-	
Are the end-of-life vehicle records available on-site?	 -	x		
Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?	 	x		
Have all observed leaks been remedied or contained?	<u> </u>	x	-	
Does your facility have a written Contingency Plan?		 	-	
Are facility personnel trained to implement the Contingency Plan?	†	x		
Does your Contingency Plan include actions to be taken in the event of the follow	/ing?	<u></u>		····
9a. Fire.	<u> </u>	x		— <u></u>
9b. Spill or release of vehicle waste fluids.	177	x		······································
9c. Unauthorized material received at facility.	 	x	-	· · · · · · · · · · · · · · · · · · ·
Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?	x.	-		<u> </u>
 Are all vehicle residues prevented from migrating from or running off your property? 		x		
Is dust controlled to prevent interference with facility operations or from leaving facility site?		х		.
Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?	-	x		
4. Are waste fluids kept from being discharged onto the ground or into surface waters?		x	-	, <u></u>
 Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)? 	T	x	-	
15a. Are the access controls working (i.e. controlling access)?	_	x		 .
Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		_	1	, man
7. Are you doing the following with your concrete (or equivalent surface) pad that is udraining, crushing, etc.?	used for	vehicle	e dismar	ıtling, fluid
17a. Cleaning dally.			x	
17b. Cleaning spills as they occur.		$\frac{1}{x}$		
17c. Collecting and properly disposing of absorbent materials.	<u> </u>		_	

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					Date of Return to
	Waste Management Compliance Checklist	NA			
18	 Have the following wastes been drained, removed, deployed, collected and/or sto practices, prior to vehicle crushing or shredding? 	red fol	lowing	best m	anagement
	18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).		x		
	18b. Lead acid batteries.	┼	1,,	 	
	18c. Mercury switches or other mercury containing devices, if any.	 	- X	+	
\bigsqcup	18d. Refrigerants, if any.	 - -	X	+-	
	18e. Air bags.	 	X	 - -	 -
	18f. PCB capacitors, if any.		x		
19	Are fluids stored separately & in containers that are compatible with their contents?	X	x		1
	Are fluids stored in closed containers?	_	x	-	
21.	Are containers which contain waste fluids in good condition and not visibly leaking?	_	x		+
	Are containers clearly and legibly labeled to describe their contents?		×		
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?		x	-	
24,	Are lead-acid batteries stored upright and off the ground?	_	x	 -	
	Are lead-acid batteries covered to protect them from precipitation?		x	-	
	Are all lead-acid batteries sent for recycling within one-year of receipt?		x	 	
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?	<u>-</u>	x	+	<u> </u>
	27a. Are provisions in place to absorb any acid leakage?		x		
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?	***	x		
	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	x			
	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?	i	<u>x</u>		
31.	If sent off-site, is used oil transported via a permitted hauler?	χ -		-	
32.	If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ	er 32a	32h	320:	<u> </u>
	32a. Is used oil burned in a used oil space heating unit, with a maximum capacity of 0.5 million BTU's per hour or less?	0.020	x	, 526.	
	32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?		x		
١	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?		x		
				i '	1

Waste Management Compliance Checklist	NA		Ne	Date of Return to
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?		k z		Compliance
34. Are sludges from sumps and oll/water separators stored in covered, closed and labeled containers?	-	x	ļ	
35. Are sludges properly recycled or disposed?	ļ. <u>-</u>	 	 -	
36. Are used oil filters properly drained, crushed or dismantled?		X		
37. Are drained oil filters properly recycled or disposed?		x		<u> </u>
38. If your facility does not require an SPDES Multi-Sector General Permit (MSGP) for Stormwater Discharge, check NA for 38a, 38b, 38c. If your facility requires an SPDES MSGP answer 38a, 38b, 38c.	x	x	!	
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?	x	_	_	y
38b. Is the information provided in the facility's original Notice of Intent or Termination submission for the SPDES MSGP still accurate and up to date?	x			, <u> </u>
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	x			
39. If your facility does not handles cleaning solvents, degreasers, battery acids or non-vehicle wastes write NA. If these materials are handled at your facility, what is the maximum amount of this material that your facility generates in any calendar month?	_	<u>n</u> ,	'a	_ pounds
		<u>n</u> ,	'a	_ gallons

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<u>_</u> _	<u></u>										
							····		 _	_	

SECTION 11 - SIGNATURE AND DATE BY OWNER, OPERATOR, OR RESPONSIBLE REPRESENTATIVE

Owner or Operator must sign, date and submit the completed form by small or mail to the appropriate Regional Office (See attachment for Regional Office small & mailing addresses and Solid Waste Contacts.)

The Owner, Operator, or Responsible Representative must also submit one copy by email, fax or mail to:

New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Permitting and Planning
625 Broadway
Albany, New York 12233-7260
Fax 518-402-9041
Email address: SWMFannualreport@dec.ny.gov

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this report form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Mrithon Millerland	2/28/2018 Date
Anthony Middendorf Name (Print or Type)	Owner Title (Print or Type)
middendorfgolf@yaho	DO.COM int or Type)
770 Spaulding Hill Rd	Owego
NY 13827 State and Zip	607 222 5472

ATTACHMENTS: YES NO